

# AFTER HOURS PASSENGER RESERVATION REQUEST

COMMAND				POC/TEL NO.				DATE	
CDO/TA				TYPE OF TRAVEL					
NAME (Last Name / First Name)				RANK		SSN/ DATE OF BIRTH (For Depn Only)			
TRANSPORTATION REQUESTED TO (OFFICIAL TRAVEL):									
DATE:			FROM:				TO:		
LEAVE ADDRESS									
PHONE _____									
MEMBER REQUEST CONNECTING FLIGHT AT OWN EXPENSE:    YES    NO									
CONNECTING FLIGHT REQUESTED TO (MEMBER'S EXPENSE):									
DATE:			FROM:				TO:		
ADDITIONAL INSTRUCTION/REMARKS:									
<b>NOTE: TO ISSUE INVOICE PLEASE LOOK AT N*BR-EMERGENCY (1. DWLIST                  2. DP1/3/ THE NBR FOR THE PASSENGER).    **** PLEASE DO NOT USE</b>									
*** STOP DO NOT WRITE IN THIS AREA ***    FOR CDO/TA ONLY									
AIRLINE	FLT NO.	DATE	FROM	AIRPORT CODE	ETD	TO	AIRPORT CODE	ETA	DATE
MIP	AMC NON USE <b>B</b>	TYPE TVL	BRANCH <b>N</b>	REQUESTED:					
REMARKS: <b>SATO NAVY HELP DESK (San Antonio, TX)</b>  <b>TEL NO. #83-13 PIN NUMBER-99-0044-22-11-2270</b> <b>FAX NO. #83-13 PIN NUMBER-99-11-210-822-3527</b>				DATE: _____		FROM: _____		TO: _____	
				DATE: _____		FROM: _____		TO: _____	
				DATE: _____		FROM: _____		TO: _____	